

## CLAIMS ONLY

Application Number

Filing Date

10/078,189

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	/								51			
2									52			
3									53			
4									54			
5									55			
6									56			
7									57			
8									58			
9	/								59			
10									60			
11									61			
12									62			
13									63			
14									64			
15	/								65			
16									66			
17	/								67			
18									68			
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43									93			
44									94			
45									95			
46									96			
47									97			
48									98			
49									99			
50									100			
Total Indep	4								Total Indep			
Total Depend	18								Total Depend			
Total Claims	22								Total Claims			